

**SHELBY COUNTY BOARD OF COMMISSIONERS  
AGENDA ROUTE SHEET**

Referred to Commission Committee (name) Hospitals & Health

For Commission Action on (date) June 2, 2008

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**A Resolution approving an amendment to the operating budget of the Immunizations Grant Program in the amount of \$51,600 and an amendment to the position control budget and this item requires the expenditure of Federal Through State grant funds in the amount of \$51,600. Resolution sponsored by Commissioner Joyce Avery.**

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**CHECK ALL THAT APPLY BELOW:**

☐ This Action does NOT require expenditure of funds.

☒ This Item requires/approves expenditure of funds as follows (complete all that apply):

County General Funds: \$ \_\_\_\_\_ : County CIP Funds: \$ \_\_\_\_\_

State Grant Funds: \$ \_\_\_\_\_ : State Gas Tax Funds: \$ \_\_\_\_\_

Federal Grant Funds: \$ \_\_\_\_\_

Other funds (Specify source and amount): \$ \_\_\_\_\_

Other pass-thru funds (Specify source and amount): \$ 96,400.00 Federal Thru State

**Originating Department:** Division of Health Services – Personal Health Services

**APPROVAL:**

Dept. Head: Johnathan Russell 544-7585 \ \_\_\_\_\_ \ \_\_\_\_\_  
(Type your name & phone #.) (Initials) (Date)

Division Director: Yvonne S. Madlock 544-7583 \ \_\_\_\_\_ \ \_\_\_\_\_  
(Type your name & phone #.) (Initials) (Date)

Finance Dept.: Michael A. Swift 545-4449 \ \_\_\_\_\_ \ \_\_\_\_\_  
(Type your name & phone #.) (Initials) (Date)

County Attorney: Fred E. Jones, Jr. 545-4611 \ \_\_\_\_\_ \ \_\_\_\_\_  
(Type your name & phone #.) (Initials) (Date)

CAO/Mayor: James Huntzicker 545-4514 \ \_\_\_\_\_ \ \_\_\_\_\_  
(Type your name & phone #.) (Initials) (Date)

ITEM NO: \_\_\_\_\_

PREPARED BY: Johnathan Russell

APPROVED BY: \_\_\_\_\_

**A Resolution approving an amendment to the operating budget of the Immunizations Grant Program in the amount of \$51,600 and an amendment to the position control budget and this item requires the expenditure of Federal Through State grant funds in the amount of \$51,600. Resolution sponsored by Commissioner Joyce Avery.**

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**WHEREAS**, That the Tennessee Department of Health has prepared a contract amendment for the period January 1, 2008 – December 31, 2008, increasing the contract in the amount of \$96,400.00; and

**WHEREAS**, That it is necessary to amend the Immunizations Operating Budget No. 433-400582 as Shown on Exhibit A; and

**WHEREAS**, That it is necessary to amend the FY 2008 Position Control Budget as shown on Exhibit B; and

**WHEREAS**, That there is no cost to the County for this activity.

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COMMISSIONERS OF SHELBY COUNTY, TENNESSEE**, That the Immunizations Contract Amendment with the Tennessee Department of Health for the period January 1, 2008 – December 31, 2008, in the amount of \$96,400 be approved.

**BE IT FURTHER RESOLVED**, That the FY 2008 Shelby County Operating Budget is hereby amended and funds appropriated as per Exhibit A, which is attached hereto and incorporated hereinto by reference.

**BE IT FURTHER RESOLVED**, That the FY 2008 Shelby County Position Control Budget is hereby amended as shown on Exhibit B, which is attached hereto and incorporated hereinto by reference.

**BE IT FURTHER RESOLVED**, That the County Mayor is hereby authorized to execute the said amendment on behalf of Shelby County Government, an executed copy of which is to be placed on file in the Purchasing Department.

**BE IT FURTHER RESOLVED**, That the County Mayor and the Director of Administration and Finance are authorized to issue their warrant or warrants to the extent of appropriations made in this resolution and to take proper credit in their accounting therefore.

\_\_\_\_\_  
A C Wharton, Jr., County Mayor

Date: \_\_\_\_\_

ATTEST:

\_\_\_\_\_  
Clerk of County Commission

ADOPTED: \_\_\_\_\_

## **SUMMARY SHEET**

### **I. Description of Item**

**Requesting approval of a budget amendment and appropriation of funds in the FY2008 Operating Budget.**

**This is a contract between Shelby County Government and the Tennessee Department of Health for the Immunizations Program.**

### **II. Source and Amount of Funding**

**A. Tennessee Department of Health**

**Operating Budget No. 433-400582                      \$96,400.00**

**B. There are no other costs, directly or indirectly, associated with this resolution.**

**C. There are no additional or subsequent obligations or expenses for which Shelby County will ultimately be responsible.**

### **III. Contract Items**

**A. Contract is for the period January 1, 2008-December 31, 2008 in the amount of \$533,200.00.**

### **IV. Additional Information Relevant to Approval of this Item**

- **Administration recommends approval of this Resolution.**
- **This budget amendment will permit maximum utilization of grant funds.**
- **There is no cost to the County for this activity.**
- **The Immunization Program delivers immunization services in compliance with the most current procedures and guidelines of the Tennessee Immunization Program (TIP), a copy of which is on file in the Tennessee Department of Health and has been provided to the Grantee. The Grantee shall collaborate with the TIP in meeting requirements and objectives established by the Centers for Disease Control and Prevention (CDC) to ensure that 90% of the 24-month old children in the Grantee's jurisdiction have completed the CDC recommended immunization service.**